AMENDMENTS TO THE CLAIMS

Please amend the claims as follows. The following listing of claims replaces all prior versions and listings of claims in the application:

Claims 1 - 2. (Canceled)

3. (Currently amended) ~~The method of claim1, wherein the disorder~~ A method of treating IgA nephropathy in a mammal, the method comprising administering to the mammal a therapeutically effective amount of an inhibitor of the lymphotoxin pathway selected from (a) a soluble lymphotoxin-beta receptor (LTBR), (b) an anti-LTBR antibody, and (c) an anti-LT antibody.

4. (Currently amended) The method of claim ~~1~~ 3, wherein the mammal is a human.

5. (Currently amended) The method of claim ~~1~~ 3, wherein the inhibitor is a monospecific anti-LTBR antibody or ~~a LT~~ anti-LT antibody or antigen-binding domain thereof.

6. (Currently amended) The method of claim ~~1~~ 3, wherein the inhibitor ~~comprises a~~ is a soluble LTBR polypeptide.

7. (Currently amended) The method of claim 6, wherein the polypeptide comprises at least 180 contiguous amino acids of ~~the amino acid sequence of~~ SEQ ID NO: 1~~, or a portion thereof~~.

Claims 8-9. (Canceled)

10. (Currently amended) The method of claim ~~8~~ 6, 7, 26, 27, 28, 29 or 30, wherein the soluble LTBR polypeptide further comprises an Fc domain of an IgG1 or IgG4 ~~a Fc fragment of IgG1 or a Fc fragment of IgG4~~.

11. (Currently amended) The method of claim ~~1~~ 3, wherein the inhibitor comprises a soluble LTBR fused to one or more heterologous protein ~~domains~~ domain.

Claims 12-13. (Canceled)

14. (Currently amended) The method of ~~claims 11~~ claim 6, wherein the soluble LTBR polypeptide is a human LTBR polypeptide ~~LT-beta-R~~.

15. (Previously presented) The method of claim 11, wherein the heterologous protein domain comprises a human immunoglobulin Fc domain.

Claims 16-23. (Canceled)

24. (Currently amended) A method of evaluating the efficacy of a compound for treatment of IgA nephropathy, comprising: administering the compound to a BAFF-transgenic non-human animal; ~~and~~ determining the test level of IgA deposits in a kidney of the animal after administration; and comparing the level with a threshold level, wherein a test level lower than the threshold level indicates that the compound is efficacious.

25. (Previously presented) The method of claim 24, wherein the animal is a rodent.

26. (New) The method of claim 6, wherein the soluble LTBR polypeptide comprises a sequence consisting essentially of SEQ ID NO: 1.

27. (New) The method of claim 6, wherein the soluble LTBR polypeptide comprises a sequence at least 95% identical to SEQ ID NO:1, and wherein the polypeptide specifically binds LT and inhibits the LT pathway.

28. (New) The method of claim 27, wherein the soluble LTBR polypeptide comprises a sequence at least 97% identical to SEQ ID NO:1.

29. (New) The method of claim 27, wherein the soluble LTBR polypeptide comprises a sequence at least 98% identical to SEQ ID NO:1.

30. (New) The method of claim 27, wherein the soluble LTBR polypeptide comprises a sequence at least 99% identical to SEQ ID NO:1.

31. (New) The method of claim 5, wherein the antibody is a humanized antibody.

32. (New) The method of claim 5, wherein the antibody is a single-chain antibody.

33. (New) The method of claim 5, wherein the antibody is a chimeric antibody.

34. (New) The method of claim 5, wherein the antibody is a CDR-grafted antibody.

35. (New) The method of claim 1, 5 or 6, wherein the inhibitor is administered by a route selected from the group consisting of: intravenous, intraperitoneal, intramuscular, intracavity, subcutaneous, and transdermal.

36. (New) The method of claim 1, 5 or 6, wherein the inhibitor is administered at a dosage from 1 ug/kg to 20 mg/kg.

37. (New) The method of claim 1, 5 or 6, wherein the inhibitor is administered at a dosage from 1 ug/kg to 10 mg/kg.

38. (New) The method of claim 1, 5 or 6, wherein the inhibitor is administered at a dosage from 100 ug/kg-1 mg/kg.

39. (New) The method of claim 10, wherein the inhibitor is formulated for injection.